



2600 Maitland Center Pkwy.  
Suite 300  
Maitland, FL 32751  
P.O. Drawer 200  
Winter Park, FL  
32790-0200  
Tel: 407-740-8575  
Fax: 407-740-0613  
www.tminc.com

Clerk's Office  
South Carolina Public Service Commission  
Synergy Business Park  
101 Executive Center Dr.  
Saluda Building  
Columbia, SC 29210

RE: Matrix Telecom, Inc. d/b/a Matrix Business Technologies d/b/a Trinsic  
Communications  
SC Authorized Utility Representative

Dear Sir or Madam:

Enclosed please find a copy of the SC Authorized Utility Representative , filed on behalf of Matrix Telecom, Inc. d/b/a Matrix Business Technologies d/b/a Trinsic Communications. No check is enclosed as there are no remittance fees due.

Questions regarding this filing should be directed to my attention at 407-740-8575. Thank you for your assistance in this matter.

Sincerely,

Kimberly N. Geuder  
Compliance Reporting Specialist

file: Matrix Telecom, Inc. d/b/a Matrix Business Technologies d/b/a Trinsic  
Communications - Reporting - South Carolina

KG/sh

228689  
2011-29-A  
ERS  
March 18, 2011  
Via Overnight Delivery

# AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

TYPE:    ☐ IXC        ☒ CLEC        ☐ ILEC        ☐ Wireless

## CERTIFICATED COMPANY INFORMATION

Matrix Telecom, Inc.

Company Name

Matrix Business Technologies d/b/a Trinsic Communications

Dba/fka

433 E. Las Colinas Blvd, Suite 400

Mailing Address

Irving, TX 75039

City, State, Zip Code

433 E. Las Colinas Blvd, Suite 400

Business Location

Irving, TX 75039

City, State, Zip Code

County

FEDERAL ID NUMBER

972-910-1900

Telephone #

## REGISTERED AGENT INFORMATION

Registered Agent: C T Corporation System,

Mailing Address: 75 Beattie Place, Two Insignia Financial Plaza

City, State, Zip Code: Greenville, SC 29601

Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:

- A. Linda Dellaero  
**General Manager** (Include address if different than above.)  
 813-892-9053 / 813-973-3243 / ldellaero@matrixbt.com  
 Telephone Number Facsimile Number E-mail Address
- B. Mary Hope  
**Customer Relations/Complaints Representative** (Include address if different than above.)  
 972-910-1374 / 866-418-9750 / regulatory@matrixbt.com  
 Telephone Number Facsimile Number E-mail Address
- C1. Mary Hope  
**Customer Relations/Complaints Representative for Escalated Complaints** (Include address if different than above.)  
 972-910-1374 / 866-418-9750 / regulatory@matrixbt.com  
 Telephone Number Facsimile Number E-mail Address
- C2. 888-411-0111  
**Customer Contact (Toll Free Number)**
- D. Tom Fritz  
**Engineering Operations** (Include address if different than above.)  
 585-413-6352 / 800-657-9714 / tfritz@matrixbt.com  
 Telephone Number Facsimile Number E-mail Address
- E. **Test and Repair** (Include address if different than above.)  
 / /  
 Telephone Number Facsimile Number E-mail Address

F. **NOC 24/7**

**Emergencies** (During non-office hours)

**888-339-3133**

/

/ **noc@matrixbt.com**

Telephone Number

Facsimile Number

E-mail Address

**In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:**

G. **Linda Dellaero**

**Regulatory Officer** (Include Address if different than above)

**813-892-9053**

/ **813-973-3243**

/ **ldellaero@matrixbt.com**

Telephone Number

Facsimile Number

E-mail Address

H. **Kimberly N. Geuder**

**Dual Party Mailings** (Name)

**P.O. Drawer 200, Winter Park, FL 32790-0200**

(Mailing Address)

**407-740-8575**

/ **407-740-0613**

/ **kgeuder@tminc.com**

Telephone Number

Facsimile Number

E-mail Address

I. **Kimberly N. Geuder**

**Interim LEC Fund Mailings** (Name)

**P.O. Drawer 200, Winter Park, FL 32790-0200**

(Mailing Address)

**407-740-8575**

/ **407-740-0613**

/ **kgeuder@tminc.com**

Telephone Number

Facsimile Number

E-mail Address

J. **Kimberly N. Geuder**

**Universal Service Fund Mailings** (Name)

**P.O. Drawer 200, Winter Park, FL 32790-0200**

(Mailing Address)

**407-740-8575**

/ **407-740-0613**

/ **kgeuder@tminc.com**

Telephone Number

Facsimile Number

E-mail Address

K. **Kimberly N. Geuder**

**Gross Receipts Mailings** (Name)

**P.O. Drawer 200, Winter Park, FL 32790-0200**

(Mailing Address)

**407-740-8575**

/ **407-740-0613**

/ **kgeuder@tminc.com**

Telephone Number

Facsimile Number

E-mail Address

L. **Kimberly N. Geuder**

**Lifeline Mailings** (Name)

**P.O. Drawer 200, Winter Park, FL 32790-0200**

(Mailing Address)

**407-740-8575**

/ **407-740-0613**

/ **kgeuder@tminc.com**

Telephone Number

Facsimile Number

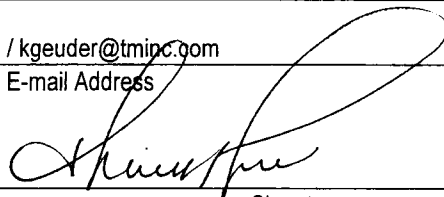
E-mail Address

**TECHNOLOGIES MANAGEMENT, INC.**

**AS ATTORNEY-IN-FACT**

**BY THOMAS M. FORTE**

This form was completed by (print name)



Signature

3/12/11

Date

Title

RETURN COMPLETED FORM TO:

Public Service Commission of SC

**Clerk's Office**

Post Office Drawer 11649

Columbia, South Carolina 29211

Office of Regulatory Staff

**Attn: Jeanne Gordon**

1401 Main Street, Suite 900

Columbia, South Carolina 29201

(Rev. PSC 11/2010)